

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213518094			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Construction Technology Laboratories, Inc.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: IL</p> </div> <div style="width: 35%;"> <p>DUE DATE: 4/30/2013</p> <p>SCC ID NO: F1663766</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 5400 OLD ORCHARD RD</p> <p style="margin-left: 40px;">CITY/ST/ZIP: SKOKIE, IL 60077</p>					
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: JEFFREY L GARRETT TITLE: PRES/CEO ADDRESS: 5400 OLD ORCHARD RD CITY/ST/ZIP/CO: SKOKIE, IL 60077 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JEFFREY L GARRETT TITLE: PRES/CEO ADDRESS: 5400 OLD ORCHARD RD CITY/ST/ZIP/CO: SKOKIE, IL 60077	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PETER EMMONS DIRECTOR 7455-T RIDGE ROAD HANOVER, MD 21076	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ARIS PAPADOPOULOS DIRECTOR 1151 AZALEA GARDEN ROAD NORFOLK, VA 23502	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARLES SUNDERLAND DIRECTOR 11011 CODY OVERLAND PARK, KS 66210	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREG SCOTT DIRECTOR 500 NEW JERSEY AVENUE, NW 7TH FLOOR WASHINGTON, DC 20001	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARY COHRS DIRECTOR 4750 E COUNTY ROAD 470 SUMTERVILLE, FL 33585	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JOSEPHINE M HOWARD SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOSEPHINE M HOWARD, SECRETARY PRINTED NAME AND CORPORATE TITLE	4/16/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			